

Operational Policy and Procedures

Policy: Reviews of Children's Medicaid Acute Inpatient Screen	n Denial Dispositions	
Commission: Community Services and Programs	Policy Number: BHS/MCO 502	
Contact: Community Services and Programs Commissioner		
Status: Approved	Date Approved: 06/12/13	
Date Reviewed/Revised:	Effective Date: 06/12/13	
Division: Behavioral Health Services / MH	Page: Page 1 of 2	

POLICY: To establish processes for reviewing inpatient acute screen dispositions involving Medicaid or Medicaid eligible members.

PURPOSE: The Kansas Department for Aging and Disability Services requires Community Mental Health Centers (CMHC) and Managed Care Organizations (MCO) adopt internal policy and procedures to process reviews in accordance with KDADS policies and procedures. CMHCs and MCOs will work to ensure the right to a review is upheld and that reviews are processed and resolved quickly.

PROCEDURE:

A. Reviews

- 1) Reviews may be requested by the parent/guardian, child welfare contract worker employed by an entity under contract with Department for Children and Families (DCF), or Juvenile Justice Authority (JJA) case manager. Review requests must be made in writing and within 24 hours of the date of disposition. Review requests received more than 24 hours from the date of disposition will result in an administrative denial by the MCO. While the review is pending, crisis services will be provided by the CMHC.
- 2) The reviews notification will include all applicable appeals information including information regarding the member's right to pursue a state fair hearing through the Office of Administrative Hearings.
- 3) The final decision will be made by an MCO physician within 24 hours of receipt of all requested supporting documentation.
- 4) The entire review process shall be completed within 48 hours from the date the request for review is received.

B. CMHCs and MCOs

1) CMHCs will provide notification of the right to review in writing. Copies of review



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and appeal policies will be made available, upon request, to any patient (consumer/member), provider, or facility rendering service.

- 2) The MCOs shall contact the CMHC for a copy of the screen if not already received. The MCO may seek additional information from the member/family and from other service providers.
 - a. CMHCs shall send requested acute screens and any additional documentation to the MCO within 12 hours after the request has been made.
 - b. The MCO agent shall consider all information received during the review regardless of whether the information was included in the initial disposition.
- 3) The final decision will be rendered by an MCO physician within 24 hours of receipt of all requested supporting documentation.
- 4) Written notification of the MCO physician's decision will be provided to the individual who requested the review with a copy to the member/family, the CMCH and KDADS Behavioral Health Services division.

Approved by:	(mase D. Helen	6-10-13
	Behavior Health Director	Date
	Community Services and Programs Commissioner	(e/8/80
	KDADS Legal	<u>07/10/13</u> Date